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ABSTRACT

A survey was conducted of the chairs of the collegiate associate degree and baccalaureate degree nursing programs in New England. The questionnaire concerned curriculum needs for nursing programs, based on a model emphasizing that the fourth year of a nursing program should be a paid clinical practicum. The response rate was 72% (n=45). Results included the following: (1) 82% of respondents believe there is a better curriculum than the current design; (2) 40% believe the proposed model would produce better clinically educated nurses; (3) 45% believe the model would increase enrollments; and (4) a large majority of the respondents indicated a need for management, logic, and ethics courses. Appended are the questionnaire, the cover letter, and a tabulation of responses. Contains 14 references. (KM)

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NURSING CURRICULUM

FOR THE 1990s

by

Sister St. Thomas, R.N., Ed.D.

Independent Study

May 1988

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TABLE OF CONTENTS

	Page
Overview	1
Current Efforts	4
The New England Study	8
Assumptions	10
Procedures	10
Data Collection and Results	11
Conclusions	12
References	15
Appendix I	16
Appendix II	17
Appendix III	18

OVERVIEW

Due to increasingly complex medical technology, an aging population and the worsening AIDS epidemic, the demand for nurses has never been greater.[1] According to the most recent statistics from the U.S. Department of Labor, there will be 1.4 million new jobs in health care by 1995 of which 452,000 will be for registered nurses.[2]

The complexity of knowledge needed to care for clients has multiplied ten fold. For example, at Cook County Hospital in Chicago 30 nurses are required to monitor nine patients around the clock. Nurses monitor a bewildering array of intravenous lines, tubes and machines, monitor blood pressure, cerebral profusion pressure, and intracranial pressure.[3]

One of the concerns of the U.S. government regarding nursing is that the nursing shortage has hit the Army, Navy, and Air Force Reserves. The Army and Air National Guard are short 31,000 registered nurses.[4]

There arises a question of collegiate response to society's health care need. Educators must prepare nurses for the current emerging role of nurses in the competitive business of health care. Educators are

faced with many problems: what to teach, declining enrollments, decreasing funds, and an increasing adult and part-time student body.

Satisfaction in nursing is essential to retention as well as to recruitment of future students into nursing. Educators need to keep abreast of the latest approaches and models used to elicit satisfaction with nursing and to provide the necessary educational support.

The nursing models and the medical model are predicated upon disease prevention, with a primary focus on crisis intervention.[5] The current literature is showing more and more multifaceted approaches to health care. Consumers must assume more responsibility for their health, and providers of health care must come from a broad base of educational preparation.

Mowry and Korpman state that the nursing students should be given tools to assess patients' needs quickly and that the goal of educators should be the development of students with strong clinical skills and the ability to articulate their findings. Furthermore, students must learn to practice nursing interventions while considering cost factors. The contemporary view of health care as a business has influenced the way in which nursing views its contributions to the health

system. The speed of change today demands that the constant search for a better way must be everybody's job.[6]

Mary Sue Infante, Dean, Boston College School of Nursing and nationally recognized leader of nursing education, speaking at the School's 40th anniversary, stated that she is confident that society will soon realize that it needs professional nursing and that the nursing profession will emerge from the current crisis stronger, more independent, with greater respect, and with a higher level of compensation.[7]

Pace setting in health care is no longer the sole domain of hospitals or doctors. The health care system is experiencing a revamping of the delivery system by consumers, state policy makers, and health care advocates. The latest role of the nurse as manager finds nurses who are not educated in the wisdom of business or management. Words such as cost benefit analysis, market share, and patient intensity for nursing index have put an extra burden on today's nurses who are educated by nursing curricula that are most often patterned after the medical module for education.[8]

CURRENT EFFORTS

Many are alarmed by a nursing shortage that is the most severe since World War II. Current growing health-care demands will require an additional 500,000 more nurses in the system by 1991. Secretary of Health and Human Services, Otis Bowen, has convened a special commission to find ways to revitalize the nursing profession. Retired Admiral James Watkins, chairman of the presidential AIDS panel, has called for federal programs to attract half a million more nurses by 1991 to treat AIDS patients and others. The aim would be to fund scholarships and loan programs to help attract nurses to ease crisis-level shortages that now exist.[9]

On January 28, 1988, in Washington, D.C., members of the National Academy of Science met to discuss recruitment, education, training, and roles of health care workers. American Nurses Association's representative, Linda Shinn, RN, told the group that there are structural flaws in the education system for entry into nursing; that identical licensure yields similar treatment by employers in regard to responsibilities in the workplace whether or not the licensee is appropriately educated.[10]

One of the American Nurses Association's current efforts is placing a priority on clarifying the nursing

educational system by implementing aggresive efforts to realize a two-tiered educational system for nursing practice with entry into professional nursing being the baccalaureate degree.[11]

Current entrepreneurs are contributing to change by developing new support health systems through innovative means that are independent of traditional health care facilities. These trail blazers do not have the educational foundation because nursing curricula usually do not provide courses in logic, management, calculus, or other courses that would provide language for expressing the different equations that govern change and the methods for solving them.

Five specific examples of efforts to address the nursing shortage and burn-out are as follows:

1. At Beth Israel Hospital in Boston the philosophy of primary nursing is used that permits continuity of patient care. Nurses are recognized for their knowledge and encouraged to initiate change. This promotes patient satisfaction and reduces nurse frustration, discouragement, and burn-out.

2. At Newark's Medical Center in New Jersey, Orem's self-care/theoretical model is used. The patient is an active participant in his/her own care. Nurses act as resources and advocates for patients and famil-

ies. This has both increased patient saitisfaction and decreased nursing morbidity and drop-out.

3. The Henry Mayo Newhall Memorial Hospital in California is placing more control, authority, and responsibility with the professional who provides care at the bedside. This is known as centralizing nursing care. Hospitals are finding this cost effective with increased nursing satisfaction.

4. Santa Monica Hospital in California is using business principles whereby nurses have input into policy making and resolution of issues. This model provides nurses with a sense of ownership and responsibility.[12]

5. One of the most futuristic efforts is in Pennsylvania. Pennsylvania Nurse's Association has announced a new 30-50-90 program i.e. $30,000 as base annual starting salary for registered nurses; $50,000 as base annual salary for experienced nurses; to be achieved by 1990. The program is aimed at recruitment and retention. Pennsylvania could well be a pace setter for the future of nursing since it has the second highest number of nursing schools in the nation (96).[13]

Probably the most pressing need among nurses themselves is a just salary. Nurses are recognizing their value in the marketplace and want to be rewarded.

The prediction may be made that once market equity in salary occurs, the downward spiral in recruitment will reverse itself. At the same time, since today's college-bound student is interested in well-paying jobs, there should be an upward spiral of those entering collegiate nursing programs.

THE NEW ENGLAND STUDY

To address the crucial question of what type of nursing education is needed in the 1990's, this research posited that:

Nursing - is the act and science of meeting society's health need and using means of prevention to thwart new disease or changes in health.

Nursing education - is the process by which one is educated to effect change; change in events of health status and maintenance.

Nursing job market - suggests that the need for health care providers will more than double by 1995 as the number of children grow from 9 million to 15 million.[14]

Recruitment into collegiate nursing programs will display a rapid increase in numbers as supply and demand warrant and as pay scales are accelerated to fair market value and equity for collaborative service given.

A cursory review of the literature showed no major attempts to research nursing education problems in Northeastern United States. Studies were cited that dealt with the growing nurse practitioner programs. This growth was a shift away from general practice during a sharp rise in the use of acute care facilities beginning in the sixties. A longitudinal study done in

1979 by the United States Department of Health, Education,and Welfare revealed tremendous variations in basic education.[15]

There is a need to acculturate the nursing student during the basic educational years as a solidified part of the health system. According to the theorists, if we are socializing students adequately, students' and faculty members' role conceptions should grow more and more alike as students advance through a program.[16]

This study advocates a new approach to educating nurses in a baccalaureate program; namely, that the last year of a four-year nursing degree program be totally clinical. The first three years would consist of liberal arts, nursing theory, and the other required support courses; the fourth-year as a nursing practicum would consist of eight-hour shifts, five days a week under the preceptorship of the college nursing faculty. The year long practicum would be a component of cooperative education with reimbursement. The cooperative approach would assist students in defraying educational costs by paying them for their services during the fourth year.

This approach would reduce the need for costly hospital in-service education time for the new graduates since the new graduate would already be a part of the

health system. The two academic semesters of the nursing practicum should solidify and enhance the acculturation process.

ASSUMPTIONS

The research for this survey was done within the context of the following assumptions:

1. Nursing care providers are decreasing in numbers due to declining nursing academic enrollments, dissatisfaction in the workplace and with salaries and increasing incidents of burn-out.

2. A dramatic turn of events could occur if the approach to education was such that new graduates were acculturated into the system differently along with an accompanying market equity in salaries.

3. Nursing education must provide a knowledge and language for expressing different equations that govern change and methods for solving them.

PROCEDURES

The following procedures were used for the study:

1. Obtained the names and addresses of all nursing programs in the New England states from the Executive Secretary of each state nursing board.

2. Identified the associate degree and the baccalaureate degree programs.

3. Prepared a mailing list of all nursing chairpersons of collegiate associate degree and baccalaureate degree nursing programs in New England.

4. Devised a questionnaire based on the posited beliefs and the basic assumptions. (Appendix I)

5. Had the questionnaire validated by nursing faculty and business communication faculty.

6. Composed a cover letter. (Appendix II)

7. Mailed the letter, questionnaire, and an addressed, stamped return envelope to each of the 65 chairpersons on the mailing list.

DATA COLLECTION AND RESULTS

The return rate of the questionnaire response was 72% (N = 45). Some respondents indicated they were undecided and others left some questions blank. The number of yes responses to each question and resulting percentages were done by using a calculator. (Appendix III) Nearly all respondents (82%) believe there is a better way to educate nurses than what the current baccalaureate curriculum design now offers.

In response to the researcher's question regarding the proposed Nursing Model for 1990's (i.e. year 01; 02; 03 all theory and support courses including nursing courses; year 04 all clinical nursing, 8-hour days), 40% believed nurses would be better educated clinically to begin employment.

Twenty-two (45%) believed schools of nursing would be able to enroll more students using this proposed model.

The survey indicated a need for these courses as follows:

management	37 (82%)
logic	35 (77%)
ethics	40 (88%)

Other suggested courses were:

Health Care Economics

Language (Spanish)

Physical Assessment (adult/child)

Broad Base Liberal Arts

Computer Science

Politics of Health Care

Research

Epidemiology

CONCLUSIONS

To meet the challenges of today, nursing educators must evaluate the strengths and weaknesses of curricula in light of the responsiveness of their programs to changes occuring in society as they relate to health.

The 45 New England nursing chairpersons responding to this questionnaire showed concern about what is currently happening regarding nursing.

Grave concern is evident when 82% of the respondents

believe there is a better way to educate nurses than current curriculum design now offers.

Curriculum content is a major concern of the respondents as evidenced by the following courses suggested for inclusion in the curriculum for the 1990's.

management courses	82%
logic	77%
ethics	88%

They further expressed a need for:

broad based liberal arts

language (Spanish)

health care economics

politics of health care

Forty percent expressed interest in a curriculum that would provide all course work in the first three years of college with the fourth year being all clinical nursing under a college faculty preceptor; 48% believed that schools could take more enrollees with this kind of a curriculum.

This researcher believes that a "three plus one" nursing curriculum might be as follows:

-- The first three-years could be devised to include broad based liberal arts, nursing theory, management, ethics, politics of health care, a language, and health care economics.

-- The fourth year of college could then be all nursing practicum under college faculty preceptorship.

-- The fourth year practicum could be under the auspices of cooperative education with salary based on a sliding scale of services rendered i.e. nurses aide; practical nurses functions; and functions of registered nurses.

-- This approach would ensure continuity of experience which would be more productive to students.

One respected respondant has stated that this proposed curriculum is primarily an entirely different approach to clinical teaching which is more forward looking, exciting, and attractive.

REFERENCES

1. Special Report: The Crisis in Nursing. Time Magazine. March 14, 1988. p. 77.

2. Bernstein, L., "Don't Quit Nursing..Consider the Alternatives!" Nursingworld Journal. March, 1988. p. 17.

3. Op. Cit., Time. March 4, 1988. p. 17.

4. Mayer, W. "Nursing Shortage Hits Guard Reserves." The American Nurse. March 1988. p. 18.

5. Mowry, M. and Korpman, R.A. "Hospital, Nursing and Medicine." The Journal of Nursing Administration. November, 1987. p. 19.

6. Ibid. p. 27-30.

7. Infante, Mary Sue. "Nursing Looks to Become a Leader." Boston College Magazine. Winter 1988. p. 7.

8. Clark, L. and Quinn, J. " The New Entrepreneurs." Nursing Health Care. January, 1988. p. 7.

9. Medicine: Finally, A Sensible AIDs Plan. Time. March 7, 1988. p. 58.

10. "Tri-Council Drafts Nursing Supply Plan." The American Nurse. March, 1988. p. 11.

11. "ANA Coordinates Attack on Nursing Shortage." Focus - The American Nurse. March, 1988. p. 15.

12. Scherer, P. "Attracting (and Keeping) Nurses." Nursing World Journal. March, 1988. p. 7.

13. McCarty, P. "SNA's Promote Nurses' Professional Welfare." The American Nurse. March, 1988. p. 21.

14. CBS Evening News. January 21, 1988.

Appendix I

Scenario: Nursing Model for 1990's

4-year nursing curriculum
Year 01, 02, 03 - All theory and support courses
Year 04 - All clinical (practicums) 8-hour days
Preceptor - College Faculty

Questionnaire	YES	NO
1. Do you believe there is a better way to educate nurses than current curriculum design now offers	_____	_____
2. Do you believe the above scenario would:		
-- clinically educate nurses better to begin employment	_____	_____
-- put more graduate nurses into the health field at a time of great crisis (in the 1990's)	_____	_____
-- allow schools to take more enrollees if students were available (especially if supply and demand suddenly enticed students to go into nursing)	_____	_____
3. Should the curriculum model for the 1990's include -		
-- management courses	_____	_____
-- calculus	_____	_____
-- logic	_____	_____
-- ethics	_____	_____
-- language		
-- other: _____		
4. Comments		

NB: If you wish to receive a copy of the survey results, please either add your name and address or request results in a separate mailing.

Appendix II

February 11, 1988

Dear Colleague:

I am conducting a study that will research the possibility of a new model for nursing education in the 1990's. The study will include a survey of all nursing Administrative Educators in the New England states.

Your valued expertise as an educator who has gone through the current system, and who daily makes decisions regarding nursing, will be of great value to the study.

All information in this survey is confidential. Under no circumstances will participants be directly identified with the results. Any questions you have about the study, I will gladly answer.

The enclosed questionnaire is short and hopefully thought provoking.

Sincerely,

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SST:lji

Appendix III

Results

Total Sent: 65 Respondents: 45
Percentage Returned: 72%

Scenario: Nursing Model for 1990's

4-year nursing curriculum
Year 01, 02, 03 - All theory and support courses
Year 04 - All clinical (practicums) 8-hour days
Preceptor - College Faculty

Questionnaire	YES	Percent
1. Do you believe there is a better way to educate nurses than current curriculum design now offers	37	= 82%
2. Do you believe the above scenario would:		
-- clinically educate nurses better to begin employment	18	= 40%
-- put more graduate nurses into the health field at a time of great crusis (in the 1990's)	15	= 33%
-- allow schools to take more enrollees if students were available (especially if supply and demand suddenly enticed students to go into nursing)	22	= 48%
3. Should the curriculum model for the 1990's include -		
-- management courses	37	= 82%
-- calculus	5	= 11%
-- logic	35	= 77%
-- ethics	40	= 88%
-- other:		

Physics
Broad Base Liberal Arts
Computer Science
Politics of Health Care
Language (Spanish)
Health Care Economics
Research
Epidemiology